



U.S. Department of Transportation
Federal Aviation Administration

800 Independence Ave., SW
Washington, DC 20591

February 2, 2004

**Instructions for Completing Amendment 13
Renewal of Hull, Comprehensive and 3rd Party Liability Coverage
Until August 31, 2004**

Documents

Amendment 13
Excel Spreadsheet for Premium Calculations
Invoice Template

Completing Documents

AMENDMENT 13

- Page 1 - Heading - Fill in your current policy number. Please be sure to indicate whether your policy is **02-** or **03-** followed by your airline code.
- Page 2 - Heading - Fill in your current policy number. Please be sure to indicate whether your policy is **02-** or **03-** followed by your airline code.
- Paragraph One - Fill in legal name of business.
- Page 3 - Paragraph 1 - Fill in the aggregate amount of liability per occurrence from your previous policy.
- Page 8 - Fill in the legal name of business in five (5) places.
- Page 12 - Signature: Fill in legal name of business. Provide original signature and printed name with title of representative binding the company on **two copies** of the Amendment.
- Page 13 - Heading - Fill in your current policy number. Please be sure to indicate whether your policy is **02-** or **03-** followed by your airline code.
- Paragraph One - Fill in legal name of business.
 - NOTE: Submit updated fleet schedule as an attachment to your Contract of Insurance for period, February 9, 2004 - August 31, 2004 (Part I, Article I)
- Page 18 - Heading - Fill in your current policy number. Please be sure to indicate whether your policy is **02-** or **03-** followed by your airline code.
- Paragraph One - Fill in legal name of business.
 - Paragraph Three - Fill in the amount from the limit of liability in the Insured's commercial policy in effect on November 25, 2002.
- Page 23 - Heading - Fill in your current policy number. Please be sure to indicate whether your policy is **02-** or **03-** followed by your airline code.
- Paragraph One - Fill in legal name of business.
 - Paragraph Three - Fill in the amount of per occurrence limit of liability from your last FAA War Risk insurance policy.

SPREADSHEET

To Calculate Premium:

Go to the **Amendment 13** Excel spreadsheet (see link in the website under Amendment 13 - **Premium Calculation Worksheet**) and enter the data in the highlighted areas. Based on the information you enter, the spreadsheet will calculate your deposit premium.

- Enter the deposit premium amount from the spreadsheet on to the invoice.
- Indicate method of payment.
- Follow the instructions on the invoice to make payment.

INVOICE

Fill in the following blanks in the invoice

- Invoice Number - Add two-digit airline identifier (booking) code. This number should be referenced on your payment. Fill in the date.
- Fill in company name, city, state, zip code, and contact information.
- Fill in the information in block section: fleet valuation, enplanements, RPMs & RTMs. These should be taken from the information you used on the spreadsheet.

Please send the first payment to FAA on or before 5:00 PM EST Thursday, February 19, 2004.

Return of Documents

Fax a signed copy of the Amendment, invoice and spreadsheet to your FAA representative by 5:00 PM EST Thursday, February 5, 2004 to ensure uninterrupted insurance coverage. If you can not include a copy of the invoice and spreadsheet at that time, send them no later than 5:00 PM EST Friday, February 19, 2004.

NOTE: Submit updated fleet schedule as an attachment to your Contract of Insurance for period, February 9, 2004 - August 31, 2004

Send TWO original signed Amendment documents by courier or overnight delivery. **Do not send by U.S. mail.** Use only courier service service such as UPS, Fed Ex, DHL, Airborne, etc.

Federal Aviation Administration
Aviation Insurance, APO-3, Room 939
800 Independence Avenue, SW
Washington, DC 20591

Fax Numbers: (202) 267-3324, or (202) 267-3278, or (202) 267-5370

Next Steps

Your FAA insurance representative will validate receipt of the correct information. After validation and execution of the Amendment by the FAA, your representative will return one signed copy to you and retain one for our records. Upon request we will send you a Certificate of Insurance as confirmation of your coverage.

Questions

Contact your FAA Insurance representative, or:

Eric Nelson, eric.nelson@faa.gov, 202-267-3090

Helen Kish, helen.kish@faa.gov, 202-267-9943